SENATE BILL No. 248

DIGEST OF INTRODUCED BILL

Citations Affected: Noncode.

Synopsis: Psychiatric crisis intervention services study. Requires the office of family and social services (office) to study certain issues concerning psychiatric crisis intervention services. Requires the office to report its findings to the legislative council and the commission on mental health and addiction before September 1, 2014.

Effective: Upon passage.

Crider

January 9, 2014, read first time and referred to Committee on Health and Provider Services.



2014

Second Regular Session 118th General Assembly (2014)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2013 Regular Session and 2013 First Regular Technical Session of the General Assembly.

SENATE BILL No. 248

A BILL FOR AN ACT concerning human services.

Be it enacted by the General Assembly of the State of Indiana:

(b) Before September 1, 2014, the office of the secretary of family and social services shall provide to the legislative council and the commission on mental health and addiction a report setting forth the following concerning comprehensive psychiatric crisis



1	intervention services:
2	(1) The services that are available in Indiana for psychiatric
3	crisis intervention in urban and rural areas of Indiana.
4	(2) To what extent the psychiatric crisis intervention services
5	are coordinated and integrated across health care delivery
6	systems.
7	(3) New services that are needed in Indiana for psychiatric
8	crisis intervention.
9	(4) The cost of the needed new services identified under
10	subdivision (3), including any cost offset for current
11	expenditures that would no longer be needed.
12	(5) The roles of private sector providers and the public sector,
13	including local and state government, for services identified
14	under subdivisions (1) through (4).
15	A report to the legislative council under this subsection must be
16	submitted in an electronic format under IC 5-14-6.
17	(c) The report required in subsection (b) must include
18	recommendations to coordinate and integrate the state's response
19	to psychiatric crisis, including an evaluation of the need for or
20	better use of the following:
21	(1) Prevention services.
22	(2) Assertive community treatment.
23	(3) Telephone crisis and triage intervention.
24	(4) Crisis intervention teams.
25	(5) Mobile crisis outreach teams.
26	(6) Urgent care centers.
27	(7) Crisis residential services.
28	(8) Transportation services.
29	(9) Medically monitored detoxification.
30	(10) Hospitalization.
31	(11) Linkage to community based services.
32	(d) This SECTION expires December 31, 2014.
33	SECTION 2. An emergency is declared for this act.

